



August 20, 2018

County Supervisor Kristin Gaspar  
1600 Pacific Highway, Room 335  
San Diego, CA 92101

Dear County Supervisor Gaspar:

Saved In America is a non-profit organization consisting of former law enforcement officers and Navy SEALs-turned licensed, insured private investigators. We are also one of only 9 NGOs appointed to the Federal U.S. Human Trafficking Exchange Group.

At no charge to families, we assist law enforcement to locate missing and runaway children – one of the groups most vulnerable to sexual exploitation. For victims of exploitation, we also help in procuring legal representation, safe housing, and rehabilitative therapy. Since 2014 we have assisted in locating and recovering 82 children, of which 60% were found before falling victim to traffickers. We have also helped Casa De Amparo with weekend surveillance to decrease and nearly diminish the number of AWOLs.

Last year when we applied for the NRP grant in October, we had recovered 46 children since 2014. In the last 10 months alone, we have recovered 36 more children. The grant of \$30,000 awarded on 12/5/2017 from your office and \$40,000 awarded on 11/14/2017 by Supervisor Horn's office for surveillance and safety equipment and software, has made an enormous impact on our operations. This critical equipment has enabled us to increase the number of recoveries dramatically in a short period of time.

We would like to formally apply for a grant of \$240,00 (total project) from the Neighborhood Reinvestment Program 2018 for a mobile command center. This will enable us to centralize our efforts and essential equipment when on an operation, have safe place for family members to remain during an operation, as well as cut down on much of our travel expenses. It will help us increase the number of cases we handle and ultimately help find more children. Because our operations can take place anywhere in the county, we are requesting \$80,000 from your district as well as district 5 and district 2. We would plan to spend these funds in the next three months.

Please see itemized costs below for mobile command center:

**\*Class 'A' RV - \$212,500:** Includes tax, license, registration & insurance (\$17500), extended warranty (\$5,000), extended maintenance agreement (\$5,000), custom logo/paint (\$10,000)

**\*Electronic Equipment - \$27,500:** Includes radio repeater extender (\$10,000), WIFI satellite extended coverage, software & antennas (\$10,000), anti-piracy software for repeater & WIFI system (\$5,000)

**\*Enhanced physical security system - \$2,500**

Thank you so much for your time and consideration. Please feel free to reach out via email or phone if you have any questions or need more information.

Best Regards,

A handwritten signature in black ink that reads "Joseph Travers". The signature is fluid and cursive, with the first name "Joseph" and the last name "Travers" clearly distinguishable.

Joseph Travers  
Executive Director  
Saved in America  
P O Box 270, Oceanside CA 92049  
760-348-8808  
[www.savedinamerica.org](http://www.savedinamerica.org)  
501(c)3 EIN: 33-0916040



**COUNTY OF SAN DIEGO**  
**APPLICATION FOR FISCAL YEAR 2018/19**  
**NEIGHBORHOOD REINVESTMENT**  
**PROGRAM GRANT**

READ INSTRUCTIONS FIRST

ALL FIELDS MUST BE COMPLETED AS APPLICABLE

**ELIGIBILITY:** Only non-profit or government/public agencies operating in San Diego County may apply.

**What is the legal status of your organization?**

☒ Non-Profit Corporation ☐ Government/Public Agency

Federal Tax Identification Number (TIN or EIN): 33-0916040

Organization Name: National Christian Information Center Inc.

(Must match name filed under Federal Tax Identification Number)

Street Address

Address: PO Box 270

City: Oceanside State: CA Zip: 92049

Mailing Address ☒ Same as Street Address

Address: PO Box 270

City: Oceanside State: CA Zip: 92049

Popular Name or d.b.a.: Saved In America

**Supervisory District** (based on street address of organization): ☐ 1 ☐ 2 ☒ 3 ☐ 4 ☐ 5 (Select only one)

Title of Grant Request: Mobile Command Center

**Contact Person** (Individual who will sign the grant agreement and be responsible for the expenditure of the funds)

Name: Joseph Travers

Title: President

Telephone Number: 760-348-8808

Fax Number: \_\_\_\_\_

Email: info@savedinamerica.org

**Grant Administrator** (Individual who will sign the grant agreement and be responsible for the expenditure of the funds)  
(This individual must be different from the Contact Person listed above)

Name: Alfred Moreno

Title: Treasurer

Telephone Number: 760-348-8808

Fax Number: \_\_\_\_\_

Email: info@savedinamerica.org

**PROJECT LOCATION** (see instructions)

Street Address: county wide

Community to be Served: All of San Diego County

**For Capital Projects:**

Owner of Project Site: \_\_\_\_\_

Name of person or entity responsible for project site maintenance (Provide a copy of any maintenance agreements or commitment letters, if applicable.) \_\_\_\_\_

**Estimated Total cost of the project:** \$240,000

(Provide verifiable cost estimates with this application)

**Total Amount requested from the County (minimum \$3,500):** \$240,000

**Estimated project completion date:** 3/31/19

**Have you made any expenditures to date for this project that you expect to claim under this grant:**

☐ Yes ☒ No

**IMPORTANT:** This information will be used to determine the effective date of your grant if awarded.

**If YES, the date of the first expenditure:** Month: \_\_\_\_\_ Year: \_\_\_\_\_

**If NO, when do you expect to start the project:** Month: November Year: 2018



**COUNTY OF SAN DIEGO**  
**APPLICATION FOR FISCAL YEAR 2018/19**  
**NEIGHBORHOOD REINVESTMENT**  
**PROGRAM GRANT**

ORGANIZATION NAME: National Christian Information Center Inc.

TITLE OF GRANT REQUEST: Mobile Command Center

**Purpose of grant:** (Describe the purpose for which you are seeking grant funding. If your request consists of multiple components, please describe each item in priority order and indicate the associated amount requested. A higher priority shall be given to requests for capital projects and/or one-time expenses.)

The purchase of a RV (mobile command center) and critical electronic equipment will make our operations much more effective, as well as cut team costs for travel and accommodate family members while on an operations. This will also enable us to increase the number of missing child cases that we can handle and ultimately help to locate and recover more children before they become victims of sex trafficking. Please see itemized costs below:

\*Class 'A' RV: \$212,500

-Includes: tax, license, registration, insurance (\$17,500), extended warranty (\$5,000), extended maintenance agreement (\$5,000), custom logo/paint (\$10,000)

\*Electronic Equipment: \$27,500

-Includes: radio repeater extender (\$10,000), WIFI satellite extended coverage software & antennas (\$10,000), anti-piracy software for repeater & WIFI system (\$5,000)

Enhanced physical security system: \$2,500

**QUESTIONS 1 & 2 WILL BE USED TO HELP EVALUATE YOUR PROPOSAL**

**1. Briefly describe how your organization measures or plans to measure the (positive) impact of activities/operations proposed in the community. Provide an estimate of how many people will be served.**

Since 2014, Saved In America has assisted in locating and recovering 82 runaway and missing. In just the last year alone, we have recovered 38 of which 60% were recovered before falling victim to sex traffickers. These children were recovered at a cost of \$5,500 per recovery, but these efforts are done at no charge to families or law enforcement. Having the mobile command center will enable us to expand our efforts and be much more flexible and effective with our manpower. In addition, it will be a safe and comfortable place for family members to stay before, during and after an operation. We believe we can increase the number of operations we take on by 50-60%.

**2. What other funding partners/sources do you have for this project?**

Not confirmed yet, but will seek sponsors. Also, some proceeds from annual fundraising event will go toward this project.



**COUNTY OF SAN DIEGO**  
**APPLICATION FOR FISCAL YEAR 2018/19**  
**NEIGHBORHOOD REINVESTMENT**  
**PROGRAM GRANT**

ORGANIZATION NAME: National Christian Information Center Inc.  
TITLE OF GRANT REQUEST: Mobile Command Center

**Financial Solvency:**

Please Type Initials \_\_\_\_\_

☐ I hereby certify that this organization is currently financially solvent and not at risk for insolvency.

FINANCIAL STATEMENT	PRIOR YEAR ACTUALS	CURRENT YEAR
	July 1, 2017 Through June 30, 2018	July 1, 2018 Through June 30, 2019
Type in Your "Fiscal Year" if different	Through	Through
COUNTY COMMUNITY ENHANCEMENT GRANTS	\$0	\$0
COUNTY NEIGHBORHOOD REINVESTMENT GRANTS (Formerly Community Projects Grants)	\$70,000	\$240,000
CITY FUNDING City Name: _____	\$0	
OTHER REVENUES (Please itemize below)		
Funds raised at annual event and other individual and corporate donations	\$237,239	\$195,352
TOTAL REVENUES (If more than \$50,000, attach IRS form 990 or 990EZ. If \$50,000 or less, attach IRS form 990-N e-postcard))	\$307,239	\$435,352
TOTAL EXPENDITURES	\$202,437	\$283,507
OPERATING SURPLUS (DEFICIT)	\$104,802	\$151,845



## RESOLUTION OF THE BOARD OF DIRECTORS

OF National Christian Information Center Inc.

(Organization name)

WHEREAS, the County of San Diego Neighborhood Reinvestment Program provides funding for non-profit corporations for certain specified purposes; and

WHEREAS, the National Christian Information Center Inc.

(Organization name)

wants to file an application with County of San Diego for Neighborhood Reinvestment Program funding.

NOW, THEREFORE, BE IT RESOLVED that the Board of Directors of

National Christian Information Center Inc.

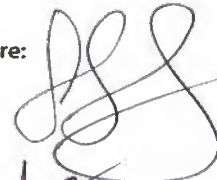
(Organization name)

1. Confirms that National Christian Information Center Inc. is a non-profit California corporation or a public agency under the laws of the State of California;
2. Approves the filing of an application with the County of San Diego for Neighborhood Reinvestment Program funding during the County's 2018-2019 fiscal year; and
3. Authorizes the people listed below to sign a grant agreement with the County of San Diego for Neighborhood Reinvestment funds for the 2018-2019 fiscal year.

1. Print Name: Joseph Travers

Title: President

Signature:



2. Print Name: Alfred Moreno

Title: Tresurer

Signature:



3. Print Name: Joshua Travers

Title: Secretary

Signature:



Adopted on this 13th day of August, 2019



Secretary, Board of Directors

Click on the question-mark icons to display help windows.

The information provided will enable you to file a more complete return and reduce the chances the IRS has to contact you.

Form **990-EZ**

**Short Form**  
**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-1150

**2017**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990EZ](http://www.irs.gov/Form990EZ) for instructions and the latest information.

**A** For the 2017 calendar year, or tax year beginning **January 1,** 2017, and ending **December 31,** 2017

**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

**National Christian Information Center**

Number and street (or P.O. box, if mail is not delivered to street address)

**PO Box 270**

City or town, state or province, country, and ZIP or foreign postal code

**Oceanside, CA 92049**

**D** Employer identification number

**330916040**

**E** Telephone number

**949-310-8100**

**F** Group Exemption Number ▶

**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶

**I** Website: ▶ [www.savedinamerica.org](http://www.savedinamerica.org)

**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☐ Other

**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	256226
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	0
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	0
	<b>4</b>	Investment income . . . . .	<b>4</b>	0
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	0
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	0
	<b>c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	0
	<b>6</b>	Gaming and fundraising events		
	<b>a</b>	Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	<b>6a</b>	0
	<b>b</b>	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) . . . . .	<b>6b</b>	0
<b>c</b>	Less: direct expenses from gaming and fundraising events . . . . .	<b>6c</b>	0	
<b>d</b>	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .	<b>6d</b>	0	
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>	0	
<b>b</b>	Less: cost of goods sold . . . . .	<b>7b</b>	0	
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>	0	
<b>8</b>	Other revenue (describe in Schedule O) . . . . .	<b>8</b>	0	
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶	<b>9</b>	0	
Expenses	<b>10</b>	Grants and similar amounts paid (list in Schedule O) . . . . .	<b>10</b>	00
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	0
	<b>12</b>	Salaries, other compensation, and employee benefits	<b>12</b>	0
	<b>13</b>	Professional fees and other payments to independent contractors	<b>13</b>	109511
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	11153
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	1725
	<b>16</b>	Other expenses (describe in Schedule O)	<b>16</b>	39751
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . . ▶	<b>17</b>	0
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	0
	<b>19</b>	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>19</b>	0
	<b>20</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>20</b>	0
	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶	<b>21</b>	0

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form **990-EZ** (2017)

**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II . . . . . ☐

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments . . . . .	31042.75	22 105184.42
23	Land and buildings . . . . .	0	23 0
24	Other assets (describe in Schedule O) . . . . .	0	24 0
25	<b>Total assets</b> . . . . .	31042.	25 105184
26	<b>Total liabilities</b> (describe in Schedule O) . . . . .	0	26 0
27	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	31042	27 105184

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III . . . ☐

What is the organization's primary exempt purpose?	Rescue childrene from trafficking
--	-----------------------------------

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

**28 Rescue children kidnapped for sex trafficking. Estimated number of people benefitted:** 32 children rescued

(Grants \$ ) If this amount includes foreign grants, check here . . . . ☐

29 NCIC: Bibles and pamphlets for military. Estimated number of people benefitted: 750

28a 71688

(Grants \$ ) If this amount includes foreign grants, check here . . . . ☐

30 GRACE: Assist in setting up a safe house for girls rescued from trafficked

29a	14204
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(Grants \$ ) If this amount includes foreign grants, check here . . . . ☐

31	Other program services (describe in Schedule O)	
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30a 7927

**32 Total program service expenses** (add lines 28a through 31a) . . . . . **▶**

## Part IV List of Officers, Directors, Trustees, and Key Employees

32	
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**Part IV** List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV . . . . . ☐

[illegible]



**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
<b>33</b> Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O . . . . .	<b>33</b>	<input checked="" type="checkbox"/>
<b>34</b> Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) . . . . .	<b>34</b>	<input checked="" type="checkbox"/>
<b>35a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? . . . . .	<b>35a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . . .	<b>35b</b>	<input checked="" type="checkbox"/>
<b>c</b> Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III . . . . .	<b>35c</b>	<input checked="" type="checkbox"/>
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	<input checked="" type="checkbox"/>
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <b>37a</b> . . . . .	<b>37b</b>	<input checked="" type="checkbox"/>
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	<input checked="" type="checkbox"/>
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . . . . .	<b>38a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b> . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter: . . . . .		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ . . . . . ; section 4912 ▶ . . . . . ; section 4955 ▶ . . . . .		
<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	<input checked="" type="checkbox"/>
<b>c</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ . . . . .		
<b>d</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ . . . . .		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T . . . . .	<b>40e</b>	<input checked="" type="checkbox"/>
<b>41</b> List the states with which a copy of this return is filed ▶ <u>California</u> . . . . .		
<b>42a</b> The organization's books are in care of ▶ <u>Erika Rogers</u> . . . . . Telephone no. ▶ <u>6154989061</u> . . . . .		
Located at ▶ <u>1807 Shaylin Loop, Antioch, TN</u> . . . . . ZIP + 4 ▶ <u>37013</u> . . . . .		
<b>b</b> At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ . . . . .	<b>42b</b>	<input checked="" type="checkbox"/>
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). . . . .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country: ▶ . . . . .	<b>42c</b>	<input checked="" type="checkbox"/>
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> . . . . .		
<b>44a</b> Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44a</b>	<input checked="" type="checkbox"/>
<b>b</b> Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44b</b>	<input checked="" type="checkbox"/>
<b>c</b> Did the organization receive any payments for indoor tanning services during the year? . . . . .	<b>44c</b>	<input checked="" type="checkbox"/>
<b>d</b> If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>44d</b>	<input checked="" type="checkbox"/>
<b>45a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>45a</b>	<input checked="" type="checkbox"/>
<b>b</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) . . . . .	<b>45b</b>	<input checked="" type="checkbox"/>

- 46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .

	Yes	No
<b>46</b>		<input checked="" type="checkbox"/>

**Part VI Section 501(c)(3) organizations only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . . ☐

- 47** Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II . . . . .

	Yes	No
<b>47</b>		<input checked="" type="checkbox"/>

- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .

	Yes	No
<b>48</b>		<input checked="" type="checkbox"/>

- 49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . .

	Yes	No
<b>49a</b>		<input checked="" type="checkbox"/>

- b** If "Yes," was the related organization a section 527 organization? . . . . .

	Yes	No
<b>49b</b>		<input checked="" type="checkbox"/>

- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
none				

- f** Total number of other employees paid over \$100,000 . . . . . ▶

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
none		

- d** Total number of other independent contractors each receiving over \$100,000 . . . . . ▶

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here** ☐ Signature of officer JOSEPH TRAVERS - PRESIDENT ☐ Date MAY 22, 2018

**Paid Preparer Use Only** Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check ☐ if self-employed PTIN \_\_\_\_\_

Firm's name ▶

Firm's EIN ▶

Firm's address ▶

Phone no. \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ☐ Yes ☐ No

# DALE R. HOWE

July 11, 2014

Re: National Christian Information Center, Inc.  
dba Saved in America  
(a California Non-Profit organization)

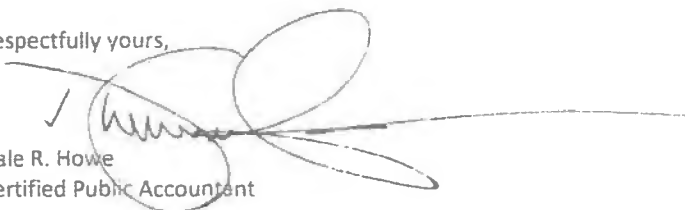
To whom it may concern:

National Christian Information Center, Inc.:

- Was incorporated on June 14, 2000. Articles of Incorporation attached.
- Is currently in "active status" with the California Secretary of State as of July 11, 2014.
- Obtained federal tax-exempt status, effective June 14, 2000, under section 501(c)(3) of the Internal Revenue Code. Confirmation letter dated October 12, 2007 attached.
- Obtained California state tax-exempt status, effective June 14, 2000, under section 23701d of the California Revenue and Taxation Code. Confirmation letter dated February 10, 2005 attached.
- Contributions to this organization are deductible under Section 170 of the Internal Revenue Code.
- Obtained a California sales tax exemption, effective April 2005, in accordance with Section 254.6 of the California Revenue and Taxation Code. Exemption attached.
- Filed a dba on May 21, 2014, doing business as Saved in America. Proof of filing attached.

If I may be of any further assistance regarding this organization, please feel free to contact me at 949-429-6800.

Respectfully yours,

✓   
Dale R. Howe  
Certified Public Accountant

Enclosures

Form Instruction On Next Page

1600 PACIFIC HIGHWAY, SUITE 260  
P.O. BOX 121750, SAN DIEGO, CA 92112-1750  
(619) 237-0502

**Return Mailing Address**

Name: LegalZoom.com, Inc.

Address: 100 W. Broadway, Suite 100  
Glendale, CA 91210

City State Zip Code



Ernest J. Dronenburg, Jr.  
County of San Diego  
Recorder/County Clerk

**BY MAIL**

2014-014108



MAY-21-2014

FILED  
Ernest J. Dronenburg, Jr.  
SAN DIEGO COUNTY CLERK  
FEES: 42.00  
EXPIRES: MAY-21-2019  
DEPUTY CLERK

**FICTITIOUS BUSINESS NAME STATEMENT**

**TYPE OF FILING AND FILING FEE (Check one)**

- ☒ Original- \$42.00 (FOR ORIGINAL FILING WITH ONE BUSINESS NAME ON STATEMENT)  
☐ Renewal- \$42.00 (NO CHANGES IN THE FACTS FROM ORIGINAL FILING)  
EACH ADDITIONAL COPY IS \$2.00 AND EACH ADDITIONAL CERTIFIED COPY IS \$3.00  
\$5.00- EACH ADDITIONAL OWNER IN EXCESS OF ONE OWNER  
\$5.00- EACH ADDITIONAL BUSINESS NAME FILED ON SAME STATEMENT, DOING BUSINESS AT SAME LOCATION.

**(1) FICTITIOUS BUSINESS NAME(S):**

PLEASE NOTE: YOU WILL BE REQUIRED TO PRESENT A VALID PHOTO ID TO FILE THIS STATEMENT IN PERSON.

a. Saved in America

b. \_\_\_\_\_

PRINT FICTITIOUS BUSINESS NAME(S)

(2) LOCATED AT: 517 Seagaze Drive #270 Oceanside CA San Diego 92049  
STREET ADDRESS OF PRINCIPAL PLACE OF BUSINESS (P. O. BOX NOT ACCEPTED) CITY STATE COUNTY ZIP CODE

Mailing Address: \_\_\_\_\_

**(3) THIS BUSINESS IS REGISTERED BY THE FOLLOWING:**

1. NATIONAL CHRISTIAN INFORMATION CENTER, INC.

Full Name/Corp/LLC

517 Seagaze Drive #270, Oceanside, CA 92049

Residence Address (P. O. Box not accepted)

City

State

Zip Code

California

If Corporation or LLC - Print State of Incorporation/Organization

2. \_\_\_\_\_

Full Name/Corp/LLC

Residence Address (P. O. Box not accepted)

City

State

Zip code

If Corporation or LLC - Print State of Incorporation/Organization

**(4) THIS BUSINESS IS CONDUCTED BY: (Check one)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> A. An Individual         | <input type="checkbox"/> E. Joint Venture            | <input type="checkbox"/> I. A Limited Liability Company                            |
| <input type="checkbox"/> B. A Married Couple      | <input checked="" type="checkbox"/> F. A Corporation | <input type="checkbox"/> J. Limited Liability Partnership                          |
| <input type="checkbox"/> C. A General Partnership | <input type="checkbox"/> G. A Trust                  | <input type="checkbox"/> K. An Unincorporated Association-Other than a Partnership |
| <input type="checkbox"/> D. A Limited Partnership | <input type="checkbox"/> H. Co-Partners              | <input type="checkbox"/> L. State or Local Registered Domestic Partners            |

(5) THE FIRST DAY OF BUSINESS WAS: \_\_\_\_\_ OR IF NOT STARTED YET, CHECK HERE ☒ NOT APPLICABLE

I declare that all information in this statement is true and correct. (A registrant who declares as true any material matter pursuant to Section 17913 of the Business and Professions code that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).)

(6) REGISTRANT NAME NATIONAL CHRISTIAN INFORMATION CENTER, INC. TITLE CEO  
(PRINT) (Corp/LLC General Partnership PRINT)

REGISTRANT SIGNATURE [Signature] IF CORP OR LLC, NAME Joseph A. Travers  
(PRINT)

If corporation, also print corporate title of officer. If LLC, also print title of officer or manager.

THIS STATEMENT WAS FILED WITH THE RECORDER/COUNTY CLERK OF SAN DIEGO COUNTY AS INDICATED BY THE FILE STAMP ABOVE.

NOTICE: IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS (5) FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THE STATEMENT PURSUANT TO SECTION 17913 OTHER THAN A CHANGE IN THE RESIDENCE ADDRESS OF A REGISTERED OWNER. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION.

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE, OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONS CODE).

IF SUBMITTING THE STATEMENT IN PERSON, THE REGISTRANT OR AGENT WILL BE ASKED TO PRESENT A VALID PHOTO ID FOR ALL THE FICTITIOUS BUSINESS NAME FILINGS.  
IF SUBMITTING THE STATEMENT BY MAIL, THE REGISTRANT OR AGENT MUST ATTACH A COPY OF A VALID PHOTO ID OR A NOTARIZED CERTIFICATE OF ACKNOWLEDGEMENT

RECEIVED  
JUL 14 2000  
BILL JONES, Secretary of State

**Articles of Incorporation  
of  
National Christian Information Center, Inc.**  
(A California Nonprofit Corporation)

Article I

The name of the corporation is : National Christian Information Center, Inc.

Article II

This corporation is a nonprofit religious corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Religious Corporation Law exclusively for religious purposes.

Article III

The name and address of the corporation's initial agent of process is:

Jeffrey T. Osborn, Esq.  
16152 Beach Blvd. Suite 250, Huntington Beach, CA 92647.

Article IV

(a) No substantial part of the activities of this corporation shall consist of carrying on propaganda or otherwise attempting to influence legislation except as permitted under Internal Revenue Code section 501(h), and this corporation shall not participate or intervene in (including publishing or distributing statements) any political campaign on behalf of any candidate for public office.

(b) The property of this corporation is irrevocably dedicated to religious purposes, as set forth in Article 2. No part of the net earnings of this corporation shall inure to the benefit of its directors, trustees, officers, private shareholders or members, or to any individual.

(c) On the winding up and dissolution of this corporation, after paying or adequately providing for the debts and obligations of the corporation, the remaining corporate assets shall be distributed to an organization (or organizations) that is organized and operated exclusively for religious purposes and that is tax exempt under Internal Revenue Code section 501(c)(3).

Dated: 5.16.00

  
Jeffrey T. Osborn, Incorporator





INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: OCT 12 2007

NATIONAL CHRISTIAN INFORMATION  
CENTER INC  
3000 W MACARTHUR BLVD STE 205  
SANTA ANA, CA 92704

Employer Identification Number:  
33-0916040  
DLN:  
17053156033007  
Contact Person:  
JOSEPH R KENNEDY ID# 31647  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
September 30  
Public Charity Status:  
170(b)(1)(A)(i)  
Form 990 Required:  
No  
Effective Date of Exemption:  
June 14, 2000  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947 (DO/CG)

February 10, 2005  
NATIONAL CHRISTIAN INFORMATION CENTER, INC.  
ENTITY ID : 2238906  
Page 2

file Form 109 (Exempt Organization Business Income Tax Return) by the 15th day of the 5th month (4 1/2 months) after the close of your annual accounting period.

Please note that an exemption from federal income or other taxes and other state taxes requires separate applications.

THIS EXEMPTION IS GRANTED ON THE EXPRESS CONDITION THAT THE ORGANIZATION WILL SECURE FEDERAL EXEMPT STATUS WITH THE INTERNAL REVENUE SERVICE. THE ORGANIZATION IS REQUIRED TO FURNISH A COPY OF THE FINAL DETERMINATION LETTER TO THE FRANCHISE TAX BOARD WITHIN 9 MONTHS FROM THE DATE OF THIS LETTER.

K SANDBERG  
EXEMPT ORGANIZATIONS  
BUSINESS ENTITIES SECTION  
TELEPHONE (916) 845-3141

EO :

CALIFORNIA STATE BOARD OF EQUALIZATION  
**ORGANIZATIONAL CLEARANCE CERTIFICATE  
FOR WELFARE OR VETERANS' ORGANIZATION EXEMPTION**



Organization Name and Mailing Address:

National Christian Information Center, Inc.  
3000 W. MacArthur Blvd., Ste. 205

Santa Ana

CA 92704

THIS CERTIFICATE NUMBER MUST BE  
SUBMITTED TO A COUNTY WHEN FILING  
A CLAIM FOR WELFARE OR VETERANS'  
ORGANIZATION EXEMPTION

Organizational Information:

Date of Certificate      05/13/2008  
BOE Ex No.              20193  
Type                      Religious  
Corporate ID No :      2238906  
Fiscal Year First Qualified: 04-05

In accordance with section 254.6  
of the Revenue and Taxation  
Code, the Board has determined  
that this organization meets the  
organizational requirements of  
section 214.

BOE-277-OC REV 1 (2-07)

**NOTICE TO ORGANIZATIONS  
GENERAL INFORMATION REGARDING  
WELFARE OR VETERANS' ORGANIZATION EXEMPTION**

Your claim for an Organizational Clearance Certificate has been reviewed and a determination has been made that your organization meets the organizational requirements for exemption under section 214. A claim for the organizational clearance certificate will be mailed to the organization periodically to verify and update information. The claim form must be completed, signed, and filed with the Board, along with supporting documents, in order to maintain eligibility for the certificate. The Board may institute an audit or verification of the organization to determine whether the organization meets the organizational requirements of Revenue and Taxation Code section 214, as required by section 15618 of the Government Code. If you have any questions concerning the organizational requirements, you may contact the State Board of Equalization, Property and Special Taxes Department, County-Assessed Properties Division, Exemptions Section, at 916-445-3524.

The Assessor may not approve a property tax exemption claim on any property until the claimant has been issued a valid Organizational Clearance Certificate under section 254.6. The Assessor may deny a claim for the exemption, notwithstanding that the claimant has been granted an organizational clearance certificate. Claim forms for the welfare or veterans' organization exemption for property newly acquired by an organization may be obtained from the Assessor in the county where the property is located.

Annually, claims for the welfare and veterans' organization exemptions and supplemental affidavits, if required, must be filed on or before February 15 with the application to the applicable Assessor to avoid a late filing penalty under section 270. (A separate claim must be filed for each property location.) The Assessor will review all claims to determine that the organization continues to use its property for qualifying purposes and activities, as specified in section 214. Any questions relating to section 214 requirements regarding qualifying purposes and uses of the property may be directed to the Assessor.

SAN DIEGO COMMERCE

2652 4TH AVE 2ND FL, SAN DIEGO, CA 92103  
Telephone (619) 232-3486 / Fax (619) 270-2503

Original FILED at the  
San Diego County Clerk's Office

MAR 19 2015

By: San Diego Commerce

NATIONAL CHRISTIAN INFORMATION C  
517 SEAGATE DR #270  
OCEANSIDE, CA - 92049

SD #: 2719576

FICTITIOUS BUSINESS  
NAME STATEMENT  
FILE NO. 2015-004477

(1) FICTITIOUS BUSINESS NAME(S)  
NCIC Investigations and Computer  
Forensics  
(2) LOCATED AT 517 Seagate Drive  
#270 Oceanside CA 92049, San Diego  
County  
(3) THIS BUSINESS IS REGISTERED BY  
THE FOLLOWING  
National Christian Information Center  
Inc., 517 Seagate Drive, #270  
Oceanside CA 92049 California  
(4) THIS BUSINESS IS CONDUCTED  
BY a Corporation  
(5) THE FIRST DAY OF BUSINESS  
WAS 07/19/2006  
I declare that all information in this  
statement is true and correct. (A registrant  
who declares as true any material matter  
pursuant to Section 17913 of the  
Business and Professions Code that the  
registrant knows to be false is guilty of a  
misdemeanor punishable by a fine not to  
exceed one thousand dollars (\$1,000).)  
(6) /s/ Joseph A. Travers, President  
National Christian Information Center, Inc.  
This Statement was filed with  
Recorder/County Clerk of SAN DIEGO  
County on February 18, 2015.  
NOTICE: In accordance with Subdivision  
(a) of Section 17920, a Fictitious Name  
Statement generally expires at the end of  
five years (5) from the date on which it  
was filed in the office of the County Clerk,  
except, as provided in Subdivision (b) of  
Section 17920, where it expires 40 days  
after any changes in the facts set forth in  
the statement pursuant to Section 17913  
other than a change in the residence  
address of a registered owner. A New  
Fictitious Business Name Statement must  
be filed before the expiration.  
The filing of this statement does not of  
itself authorize the use in this state of a  
fictitious business name in violation of the  
rights of another under Federal, State, or  
Common Law. See Section 14411 et  
seq. Business and Professions Code).  
2/24 3/3, 3/10, 3/17/15

SD-2719576#

PROOF OF PUBLICATION

(2015.5 C.C.P.)

State of California )  
County of SAN DIEGO ) ss

Notice Type FNS - FICTITIOUS BUSINESS NAME

Ad Description:


NCIC INVESTIGATIONS AND COMPUTER FORENSICS

I am a citizen of the United States and a resident of the State of California; I am  
over the age of eighteen years, and not a party to or interested in the above  
entitled matter. I am the principal clerk of the printer and publisher of the SAN  
DIEGO COMMERCE, a newspaper published in the English language in the  
city of SAN DIEGO, county of SAN DIEGO, and adjudged a newspaper of  
general circulation as defined by the laws of the State of California by the  
Superior Court of the County of SAN DIEGO, State of California, under date  
12/13/1991, Case No. 631749. That the notice, of which the annexed is a  
printed copy, has been published in each regular and entire issue of said  
newspaper and not in any supplement thereof on the following dates, to-wit:

02/24/2015, 03/03/2015, 03/10/2015, 03/17/2015

Executed on: 03/17/2015  
At Los Angeles, California

I certify (or declare) under penalty of perjury that the foregoing is true and  
correct



Signature



# State of California



## SECRETARY OF STATE

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



**IN WITNESS WHEREOF**, I execute this certificate and affix the Great Seal of the State of California this day of

JUN 20 2000

*Bill Jones*

Secretary of State





STATE OF CALIFORNIA  
FRANCHISE TAX BOARD  
PO BOX 1286  
RANCHO CORDOVA CA 95741-1286

In reply refer to  
755:G :KSS

February 10, 2005

NATIONAL CHRISTIAN INFORMATION CENTER INC  
JOSEPH TRAVERS  
34202 DEL OBISPO ST SPC 62  
DANA POINT CA 92629-3918

Purpose : RELIGIOUS  
Code Section : 23701d  
Form of Organization : Corporation  
Accounting Period Ending: September 30  
Organization Number : 2238906

You are exempt from state franchise or income tax under the section of the Revenue and Taxation Code indicated above.

This decision is based on information you submitted and assumes that your present operations continue unchanged or conform to those proposed in your application. Any change in operation, character, or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address must also be reported.

In the event of a change in relevant statutory, administrative, judicial case law, a change in federal interpretation of federal law in cases where our opinion is based upon such an interpretation, or a change in the material facts or circumstances relating to your application upon which this opinion is based, this opinion may no longer be applicable. It is your responsibility to be aware of these changes should they occur. This paragraph constitutes written advice, other than a chief counsel ruling, within the meaning of Revenue and Taxation Code Section 21012(a)(2).

You may be required to file Form 199 (Exempt Organization Annual Information Return) on or before the 15th day of the 5th month (4 1/2 months) after the close of your accounting period. Please see annual instructions with forms for requirements.

You are not required to file state franchise or income tax returns unless you have income subject to the unrelated business income tax under Section 23731 of the Code. In this event, you are required to




## Business Search - Entity Detail

The California Business Search is updated daily and reflects work processed through Sunday, August 19, 2016. document **Processing Times** for the received dates of filings currently being processed. The data provided is a certified record of an entity. Not all images are available online.

**C2238906 NATIONAL CHRISTIAN INFORMATION CENTER, INC.**

**Registration Date:** 06/14/2000  
**Jurisdiction:** CALIFORNIA  
**Entity Type:** DOMESTIC NONPROFIT  
**Status:** ACTIVE  
**Agent for Service of Process:** ALEXANDRIA PHILLIPS  
517 SEAGAZE DRIVE #270  
OCEANSIDE CA 92049  
**Entity Address:** 517 SEAGAZE DRIVE #270  
OCEANSIDE CA 92049  
**Entity Mailing Address:** 517 SEAGAZE DRIVE #270  
OCEANSIDE CA 92049

A Statement of Information is due EVERY EVEN-NUMBERED year beginning five months before and through the

Document Type	File Date	PDF
SI-COMPLETE	01/08/2018	
SI-COMPLETE	01/04/2016	
REGISTRATION	06/14/2000	

\* Indicates the information is not contained in the California Secretary of State's database.

- If the status of the corporation is "Surrender," the agent for service of process is automatically revoked. Please see Corporations Code **section 2114** for information relating to service upon corporations that have surrendered.
- For information on checking or reserving a name, refer to **Name Availability**.
- If the image is not available online, for information on ordering a copy refer to **Information Requests**.
- For information on ordering certificates, status reports, certified copies of documents and copies of documents available in the Business Search or to request a more extensive search for records, refer to **Information Requests**.
- For help with searching an entity name, refer to **Search Tips**.
- For descriptions of the various fields and status types, refer to **Frequently Asked Questions**.

certified record of an entity.

- Select an entity name below to view additional information. Results are listed alphabetically in ascending order by entity name, or you can select a column title to change the sort order.
- To refine the search results, enter a word or a string of words in the "Narrow search results" box. The "Narrow search results" will search on all fields of the initial search results.
- For information on checking or reserving a name, refer to Name Availability.
- For information on requesting a more extensive search, refer to Information Requests.
- For help with searching an entity name, refer to Search Tips.
- For descriptions of the various fields and status types, refer to Frequently Asked Questions.

Results of search for Corporation Name keyword "National Christian Information Center Inc." returned 1 entity record (out of 1 record found).

Show 10 entities per page

Narrow search results:

Entity Number	Registration Date	Status	Entity Name	Jurisdiction	Agent for Service of Process
C2238906	06/14/2000	ACTIVE	<u>NATIONAL CHRISTIAN INFORMATION CENTER, INC.</u>	CALIFORNIA	ALEXANDRIA PHILLIPS

Showing 1 to 1 of 1 entities

Previous

1

Next

Modify Search

New Search